MISSISSIPPI SCHOOL REGISTER



SCHOOL Breenhead

COUNTY Jackson

POST OFFICE Ocean Springs, miss.

School Term From Sept. 10, 1934 to april 26, 1935

TEACHER Bernice E. Ellis.

W. F. BOND

State Superintendent of Public Instruction

reen Dead

PHYSICAL DEFECTS

Defective teeth.
Diseased tonsils.
Adenoids.
Defective eyesight.
Defective hearing.

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P6—Infantile paralysis.
P7—Crippled foot or leg.
P8—Crippled hand or arm.
P9—Seriously underweight
P10—Seriously overweight.

SOURCES OF ENROLLMENT

R-First regular enrollment this year. C-Transfer from other public S-Transfer from other state. school in this county.

TS-Transfer within this school. MO-Transfer from other Misissippi

CAUSES OF LATE ENTRANCE

viously enrolled in any school.

L6—Transfer from another school.

L7—Illness or quarantine.

L8—Negligence or indifference of child

L1—Work on farm at home.
L2—Employed on farm away from home.
L3—Employed in industry.
L3—Broken family.
L5—Just moved to place and not prepublic school outside this county. AW-Re-entry after withdrawal. or parent. GENERAL DATA CONCERNING PUPILS NAMES OF PUPILS No. years in school previous to this year years in grade Distance from Age as of Sept. 1 Date of School in Miles Write surname first. Date of Birth To Nearest 1/2 M. List grades separately. Physical Defects Vaccina-Trans-ported at Public Expense List boys in each grade first, tion followed by girls of same grade. Walked No. previ Sex Mos. Days Yr. Mo. Day Yrs. 1927 31 Surney, Henry 0 m 9 1925 22 3 3 1924 9 25 10 6 23 ndolph, Robert Jv 1927 2 23 1 27 F. 1927 when 3 1925 8 6 3 2) 3 9 3 1922 2) 24 1927 22 10 7 3 3 1926 رر 29 2 F. 2 13 23 3 15 1919 m 2)

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1921 23 4 7 10 10 1994 4 26

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CAUSES OF WITHDRAWAL

W 1—Moved away.
W 2—Transferred to another school.
W 3—Employment certificate.
W 4—Employed at home.
W 5—Employed in Industry.

W 6—Employed on farm away from home.

W 7—Committed to institution.

W 8—Finished eighth grade or beyond 15 years old.

W 10—Physical incapacity.

W 11—Marriage.

W 12—Death.

W13—Suspended or expelled by public authority.
W14—Other or unknown causes.

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|--------------------------------|--------------------------|--------|-------------------------|-------------------------|---------------------------|------------------------|---------------|--------------------|
| | 0 | | 10 | | | | Date | of |
| Name of Parent or Guardian | Address of Pa Guardia | | Occupation of Parent or | of | f late | if wal | Las Attend | t |
| | | | Guardian | Source of Enrollment | Cause of late Entrance | Cause of withdrawal | | 3,0 |
| . 1. 5 | <u></u> | | 0 20 | R | Ощ | 100 | Yr. | Mo. |
| 1 Jim Burney | Clean & | pringe | Common Lab. | R | | | | apr. 26 apr. 26 |
| 2 Jim Burney | | | | R | | | " | ده دد |
| 8 Grant Payton 4 Louis Reed | | | | R | | | 2) | رد ره |
| * Nous Pela | | | | | | | | |
| 6 Jim Burney | | | | R | | | 1935 | apr.2 |
| 7 Jim Burney | | | | R | | | 22 | 22 2) |
| 8 Grant Payton | | | | R | | | 2) | 22 2) |
| · Grant Parton | | | | R | | | 23 | 27 67 |
| 10 Charlie Reed | | | | R | | | 22 | 3))) |
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| 12 | | | | | | | 19. | |
| 18 Jim Burney | | | | R | | | 1935 | apr.2 |
| 14 Jim Burney | | | | R | | | 27 | 20 27 |
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| 17 Drant Fayton | , | | | R | 1- | | | gan.2 |
| 18 Rob Pierce | | | | | | | 1935 | |
| 19 Rob Pierce | | | | | AA.2 | MP | 1935 | Trouv. |
| 21 Grant Peyton | | | | R | | | 1926 | apr.2 |
| | | | | 11 | | | (1)3 | apora |
| 22 | | | | | | | | |
| 23_ 24 Matthew Burne | | | | R | | | 1935 | apr.2 |
| 25 albert Reed | | | | R | | | 1935 | 22 2) |
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| 27 | | | | | | | | |
| 28 Charlie Reed | | | | R | | | 1935 | apr.2 |
| 29 | | | | | | | | |
| 80 | | | | | | | | |
| 31 Thomas Colson | | | | R | | | 1935 | apr.26 |
| 82 | | | | - | | | | 1 |
| 38 matthew Burner | | | | R | | | 1935 | apra |
| 84 Thomas Collagon | | | | R | | | 37 | 33 2 |
| 35 | | _7_ | | | | | | |
| | | | | | | | | |

A1—Work at home. A2—Outside employment. A3—Sickness of child. A4—Sickness in home. A5—Indifference. A6—Quarantine. A7—Bad weather and bad roads.

ATTENDANCE RECORD

A8—Poverty.
A9—Indifference and neglect of parents or children.
A10—Truancy.
A11—Suspended.
A12—Other causes.

September 10. Ending October

Month Beginning. , 19_34 SECOND WEEK FIRST WEEK THIRD WEEK FOURTH WEEK Days belonging Days Absent Present Times Tardy Chief cause of absence Thurs. Thurs. Thurs. Wed. Wed. Wed. Mon. Wed. Days] Tues. Mon. Tues. Fri. Fri. Fri. A³ A3 A3 3 201 A3 19 2 3 4 5 20 6 1 18 7 20 8 20 9 20 10 11 12 20 13 20 14 15 16 16 17 18 19 20 21 22 23 20 24 25 26 27 20 28 29 30 31 32 33 OM 34 35

Personal Data Concerning the Teacher

| 1. | Name Ellis, Bernice | 16. What professional books have you read during the year? |
|----|---|--|
| | (Surname first, other names in full) | The art of Thinking |
| 9 | Date of birth-Year 1914 Month Sept. Day 3 | (List by titles and authors) |
| ۷. | vate of bitti Tears III month | |
| 3. | Permanent home address moso Court, miss. | Road to Eulture |
| | tomaton none address. | (List by titles and authors) |
| 4. | CERTIFICATE OR LICENSE NOW HELD. | |
| | (Underscore) | (List by titles and authors) |
| | | (List by titles and authors) |
| | Professional—College Degree | |
| | Sophomore—2 year college | (List by titles and authors) |
| | Elementary—High school diploma | |
| | Reciprocal—Issued on license from another State | (List by titles and authors) |
| | State Exemption—5 consecutive years teaching First Grade—by examination | (List by titles and authors) |
| | Second grade—by examination | 17. Are you a member of the Mississippi Education Association |
| | Third Grade—by examination | The first of the same of the s |
| | Primary License—by examination | yes |
| | Transfer License—from one county to another. | |
| | | 18. Member County Teacher Association? 400 |
| 5. | Date issued: Year 1931 Month July Day 11 | 0:, |
| | | 19. Weeks at summer school last summer |
| 6. | Years taught prior to this year one (8 months count as | |
| | one year). | 20. Total number of months you have attended school above t |
| 7. | Years taught in this school prior to this year one | 3/ |
| | | elementary school? 36 |
| 8. | Years taught in this county prior to this year one | 21. Are you married? |
| | | 21. Are you married: |
| 9. | Years taught in this position prior to this year one | 22. How many dependents? |
| 0 | G-1 3 1 1 1 | |
| 0. | Salary received per month \$ 30.00 | 23. Days taught by substitutes? |
| 1 | Length of school term (months) Eight | |
| - | Dongon of Benoof term (months) | 24. Number of homes visited? |
| 2. | Cost of room and board per month \$ 10.00 | |
| | | 25. Do you live in the community where you teach—Yes_No_ |
| 3. | Do you teach less than half time, half time, or more? Moce | (Check) |
| | (This means during the day, the week, or month) | 26. How many Saturdays and Sundays have you spent where y |
| 4 | Are you a principal? YesNo | |
| | 100 | teach (this year only)? about 3/3 |
| | Supervisor? YesNo | |
| | | 27. What grades do you teach? 1-6. |
| 5. | What professional magazines do you read regularly? | 00 If a high school to show what subjects do not to 10 |
| | miss. Educational Journal | 28. If a high school teacher, what subjects do you teach? |
| | (List of names) | |
| | | |
| | Jime | |
| | (List of names) | |
| | The Instructor | |
| | (List of names) | |
| | | |
| | (List of names) | |
| | | |

REPORT ON TRAINING OF THE TEACHER

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| QUARTER HOURS CREDIT IN SUBJECT-MATTER (Write subjects) | | | | | | | | | | | | | | | | | | | | | | | | - |
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| DN NG | Supervision | | | | | | | | | | | | | | | | | | | | | | | |
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| QUARTER HOURS CREDIT IN FOLLOWING KINDS OF PROFESSIONAL WORK | guidas | chool te | S dgiH | | | | | | | | | | | | - 12 | | | | | | | | | - |
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| UAF | Visimity Visionity | | Primar | | | | | | | | | | | | | | | | | | | | | |
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| practice | Quarter hours received in practice | | | | | | | | | | | | | | | | | | | | | | | |
| pro- | Quarter hours received in pro- fessional subjects** | | | | | | | | | | | | | | | | | | | | | | | |
| bəv | Quarter hours credit received | | | | | | | | | | | | | | | | | | | | | | | 1 |
| bevie | No. High School units received | | | | | | | | | | | | | | | | | | | | | | | |
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| DATES | | From | Mo. | | | | | | | | | | | | | | | | | | | | | |
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| | NAME OF SCHOOL | | N. | Phut | | | | T | First | | | | NORMAL SCHOOL OR TEACHERS COLLEGE | | , | | | | | | | | | |
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*Do not include quarter hours credit received for practice teaching.